

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Haile</i>	<i>32</i>	<i>05-07-01</i>
O.I.P.E. CLASSIFIER	<i>SG</i>	<i>022</i>	<i>5/23</i>
FORMALITY REVIEW	<i>SG</i>	<i>1077</i>	<i>06/27/01</i>
RESPONSE FORMALITY REVIEW			<i>01/04/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓ 9/14/01
2	✓ 8/5/01
3	✓ 3/17/01
4	✓
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Best Available Copy

If more than 150 claims or 10 actions  
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*10-40-01*  
*10-40-01*  
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